

## **STARPORT SERVICES-JSC SCHOLARSHIP APPLICATION FORM**

Employee's Name	<hr/>		
Employer	<hr/>	Mail Code	<hr/>
Office Phone	<hr/>	Home Phone	<hr/>
Office Address	<hr/>		
	(Street)	(City)	(Zip Code)
Home Address	<hr/>		
	(Street)	(City)	(Zip Code)
Student's Name	<hr/>		
Relationship to Employee	<hr/>		
Name and Address of High School/College	<hr/>		
	<hr/>		
Name of High School Counselor	<hr/>		
Date of High School Graduation	<hr/>		

I certify that the information provided in this application is current and correct and that the student listed above is claimed by me as an exemption on my most recent Federal income tax return or is a natural, adopted, or foster child for which I furnish the majority of support.

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Employee signature/date

Privacy Act Statement: The attached material is subject to the Privacy Act of 1974, as amended.

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TO: Employee/Applicant

1. Please send (or return to Building 1, Room 457) the completed application in a sealed envelope addressed as follows:  

BA/Debra L. Johnson  
Chairman, Scholarship Committee
2. The applications will be held in confidence and will be reviewed only by the Scholarship Committee. For your information, it is our practice to have someone from my staff review the applications for basic eligibility and then "sanitize" Parts A, B, C, and D of the Application Form and the transcripts (remove all identifications of names, address, etc.) before passing it to the Scholarship Committee for review. This helps us ensure that the Committee considers only the specified criteria in reaching its decisions.
3. If you have any questions concerning the application procedures, please call Debra L. Johnson, at 281-483-4157.

Sincerely,

*Original signed by:*

Debra L. Johnson  
Chairman, Scholarship Committee

## PART A

### SCHOLASTIC RECORDS

Please attach a copy of all transcripts. If SAT or ACT scores are not shown on the transcripts, please provide a copy of the report scores. You are responsible for arranging for the school to furnish transcripts of grades and results of SAT or ACT by the deadline date. If the student is taking accelerated course, please insure that the school indicates which courses are accelerated or premium to permit an equitable evaluation of grades.

NAME OF SCHOOL \_\_\_\_\_

HIGH SCHOOL GRADUATION DATE \_\_\_\_\_

HIGH SCHOOL GRADE POINT AVERAGE \_\_\_\_\_ MAXIMUM POSSIBLE \_\_\_\_\_

HIGH SCHOOL CLASS RANK \_\_\_\_\_ OUT OF \_\_\_\_\_ STUDENTS GRADUATING

COLLEGE (IF ANY) GRADE POINT AVERAGE \_\_\_\_\_ MAXIMUM POSSIBLE \_\_\_\_\_

LIST COLLEGES/UNIVERSITIES TO WHICH STUDENT HAS APPLIED FOR ADMISSION

WHICH COLLEGE/UNIVERSITY IS THE STUDENT MOST LIKELY TO ATTEND:

WHAT FIELD OF STUDY DOES THE STUDENT PLAN TO PURSUE?

WHAT SPECIAL RECOGNITION, IF ANY, DID STUDENT RECEIVE FOR EXCELLENCE IN HIGH SCHOOL/COLLEGE WORK SUCH AS HONORS, PRIZES, OR SCHOLARSHIPS?

## Part B

## SCHOOL/COMMUNITY INVOLVEMENT

LIST EXTRACURRICULAR ACTIVITIES IN WHICH STUDENT PARTICIPATED IN WHILE IN HIGH SCHOOL, SUCH AS ATHLETICS, MUSIC, DRAMATICS, DEBATING, CLUB WORK, PUBLICATIONS, OR STUDENT GOVERNMENT. INDICATED ANY LEADERSHIP ROLES IN THESE ACTIVITIES.

[illegible]

LIST PERTINENT OUT OF SCHOOL ACTIVITIES (E.G., CHURCH, SCOUTING, JOBS, COMMUNITY SERVICE, ETC.)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

## **PART C**

### **FINANCIAL INFORMATION**

AGES:

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## WHEN WILL THEY GRADUATE?

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ARE THEY RECEIVING FINANCIAL AID IN THE FORM OF SCHOLARSHIPS OR GRANTS? (IF YES, SPECIFY DONOR AND AMOUNT)

\$

\$

\$

\$

AMOUNT OF FINANCIAL ASSISTANCE YOU MAY BE ABLE TO FURNISH ANNUALLY:

**IS STUDENT APPLYING FOR ANY OTHER SCHOLARSHIPS?**

IF SO, WHICH ONES AND IN WHAT AMOUNTS?

HAS STUDENT ALREADY BEEN AWARDED ANY OTHER SCHOLARSHIPS? (IF YES, SPECIFY DONOR AND AMOUNT)

UNUSUAL EXPENSES OR ELABORATION OF ANY ITEMS ABOVE (MEDICAL EXPENSES, ETC.):

## PART D

### PERSONAL GOALS

IN THE SPACE PROVIDED BELOW, TELL WHY YOU ARE MOTIVATED TO ATTEND COLLEGE AND HOW YOU HOPE TO UTILIZE YOUR DEGREE AFTER YOU GRADUATE. PLEASE TYPE OR PRINT WITH BLACK INK.

[illegible]

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## PRIVACY ACT STATEMENT FOR STARPORT SERVICES ACTIVITIES

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The following constitutes the Privacy Act Statement for the forms listed below:

JSC 707	Starport Services – Scholarship Application
(No number)	Group Life Insurance Application
(No number)	Beneficiary Designation (5878 9-73)
(No number)	Union Dues Deduction (00-2)
(No number)	Credit Union Deduction
(No number)	Application for Employment
(No number)	Employees Withholding Allowance Certificate (W-4)

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1. Information to be provided on the forms listed above is authorized to be collected by 42 USC 2473; 44 USC 3101; NASA Management Issuance 9050.6; Treasury Fiscal Requirement Manual, Part III, Payroll Deductions and Withholding; Federal Personnel Manual; JSCM 3712, Exchange Activities Manual, dated December 1973; Exchange Operations Manual, dated February 1974. Providing the Social Security Account Number (SSAN) on the Union Dues Deduction is at the request of the employee union. Providing the SSAN on the Credit Union Deduction form is at the request of the Credit Union. Providing the SSAN on the Application for Employment form is mandatory under Executive Order 9397, dated November 22, 1943, in order to be considered for employment and its associated benefits. Providing the SSAN on form W-4 is mandatory under the regulations of the Treasury Fiscal Requirement Manual. Providing other information requested is voluntary under the law.
2. The principal purposes for which this information is collected are as follows:
  - a. With respect to past or present employees of the Starport Services:
    - (1) Pay employees and advise employees through Leave and Earnings Statements;
    - (2) Provide for promotion opportunities, disciplinary actions, staffing controls, budget requirements, employee fringe benefits, and other related personnel managerial purposes; and
    - (3) Submit reports in accordance with legal or policy directives and regulations to Center Management and NASA Headquarters.
  - b. Award scholarships to the sons and daughters of NASA/JSC employees; and
  - c. Facilitate participation in social or sport activities sponsored by the Starport Services.

3. This information will be incorporated in the Starport Services Activities Records – NASA. The routine uses of this information outside NASA will be:
  - a. Provide information in accordance with legal or policy directives and regulations to the Internal Revenue Service. Department of Labor, Department of Commerce, Texas State Government Agencies, labor unions.
  - b. Provide information to insurance carriers with regard to workman's compensation, health accident, and retirement insurance coverages.
  - c. Provide employment or credit information to other parties as requested by a current or former employee of the Starport Services.
  - d. Referral to a Federal, state, local or foreign law enforcement agency in an investigation of a violation or potential violation of laws or regulations when the record indicates such a violation or potential violation.
  - e. Requesting information from a Federal, state, or local agency maintaining Civil, criminal, or other relevant enforcement information, or other pertinent information.
  - f. Providing information on request to a Federal agency to the extent that the information is relevant and necessary to the requesting agency's decision on hiring, retention, reporting of an investigation, granting a security clearance, letting a contract, or issuance of a license, grant, or other benefit.
  - g. Disclosure to the Department of Justice for the purpose of representing the Government, and to parties or counsel involved in the proceedings in the course of pre-trial discovery.
4. Failure to provide all or any part of the information requested, may, in the case of the Starport Services Scholarship Application, result in not being considered for a scholarship. Failure to provide information requested, including the SSAN, on the Group Life Insurance form or the Beneficiary Designation form may result in not obtaining or a delay in obtaining the benefits or services desired. Failure to provide information requested, including the SSAN, on the application for employment or the Form W-4 may result in not being considered for employment or dismissal from employment. Failure to provide the SSAN on the Union Dues Deduction form and Credit Union Deduction form has no effect on an individual's status with respect to employment by the Starport Services.